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PTO/SB/21 (09-04)

Application Number 10/617,935 Filing Date TRANSMITTAL July 11, 2003 First Named Inventor **FORM** Drogin, et al. **Art Unit** 3732 **Examiner Name David Comstock** (to be used for all correspondence after initial filing) Attorney Docket Number 02013-21967 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC **√** Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a **Proprietary Information** After Final Provisional Application Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Identify Terminal Disclaimer Extension of Time Request below): Request for Refund Express Abandonment Request CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Also enclosed are: Reply to Missing Parts/ Incomplete Application Declaration of Catherine Drogin demonstrating evidence of commercial success; 12 -1 Reply to Missing Parts Declaration of Dr. Lewis J. Kass demonstrating unexpected results of invention; under 37 CFR 1.52 or 1.53 Return Receipt Postcard; and Express Mail Label EL 968230908 US SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Milbank, Tweed, Hadley & McCloy LLP Signature hh Printed name Michael Kurzer Date Reg. No. 11-21-2005 57,350 **CERTIFICATE OF TRANSMISSION/MAILING** I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as EXPRESS mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature Date Typed or printed name November 21, 2005 Veronica Alvarez

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (12-04v2) Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Noder the Panerwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** 10/617,935 RANSMIT Filing Date July 11, 2003 For FY 2005 First Named Inventor Drogin, et al. **Examiner Name** Comstock Applicant claims small entity status. See 37 CFR 1.27 Art Unit 3732 TOTAL AMOUNT OF PAYMENT 0 Attorney Docket No. 02013-21967 **METHOD OF PAYMENT** (check all that apply) Check Credit Card Money Order None Other (please identify): ✓ Deposit Account Deposit Account Number: 13-3250 Deposit Account Name: Milbank Tweed For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION**

1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity Small Entity** Small Entity **Application Type** Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 500 200 150 250 100 Design 200 100 100 130 50 65 200 300 Plant 100 160 150 80 300 500 600 Reissue 150 250 300 Provisional 200 100 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee Description Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 360 180 Multiple dependent claims Multiple Dependent Claims **Total Claims Extra Claims** Fee Paid (\$) Fee Paid (\$) - 20 or HP = Fee (\$)

HP = highest number of total	al claims paid for, if gre	ater than 20.				
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)		 ·	
3 or HP =	x	=				
HP = highest number of inde	pendent claims paid fo	or, if greater than 3	3.			
3. APPLICATION SIZE If the specification and	drawings exceed					
listings under 37 C	FR 1.52(e)), the a	pplication siz	e fee due is \$25	0 (\$125 for small enti	ty) for each	additional 50
sheets or fraction to the sheet or fraction t	Extra Sheets	S.C. 41(a)(1) <u>Number of</u> 50 =	each additional	1.16(s). 50 or fraction thereof o a whole number) x	Fee (\$)	<u>Fee Paid (\$)</u>
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)						Fees Paid (\$
Other (e.g., late filin	g surcharge):			·		.,

SUBMITTED BY .				
Signature	What Kim	Registration No. (Attorney/Agent) 57,350	Telephone 212-530-5442	
Name (Print/Type)	Michael Kurzer	Date 11-21-2005		

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